



**LANDSCAPE ARCHITECT REGISTRATION EMPLOYMENT VERIFICATION FORM**

Open Records Notice: The Texas Public Information Act, Ch. 552 TX Gov't Code, provides for public access to this document.

1. Applicant's Name: \_\_\_\_\_  
First Middle/Initial Last

2. Mailing Address: : \_\_\_\_\_  
\_\_\_\_\_

Daytime Phone No. ( ) \_\_\_\_\_ Email: \_\_\_\_\_

3. Employment Date: ☐ Full-time (35+ hrs /week)  
☐ Part-time (at least 20-34 hrs/week/6 consecutive months) \_\_\_\_\_ hrs/per week

From: \_\_\_\_\_ To: \_\_\_\_\_  
(Ending Date or "Present/Current")

4. Employer/Company: (Address): \_\_\_\_\_  
\_\_\_\_\_

5. Employment Type:  
☐ Landscape architectural services only  
☐ Teaching landscape architecture as a full-time faculty member in a LAAB accredited program;  
☐ Other (describe): \_\_\_\_\_

6. Supervisor's Name: \_\_\_\_\_  
Company/Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. If Supervisor is certified or registered, please provide the following information:

	State	Initial Certification or Registration Date	Certification/ Registration Number	Expiration Date
CLARB Certification				
Registered Landscape Architect				

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

**NOTICE TO PERSON COMPLETING THIS FORM:** With few exceptions, upon request you are entitled to be informed about the information the Texas Board of Architectural Examiners (TBAE) collects about you through this form. Pursuant to Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review such information. Pursuant to Section 559.004 of the Texas Government Code, you are entitled to have TBAE correct information about you that is incorrect. Making a false statement under oath may be a Criminal Offense\*\* Penal Code: 37:02 Perjury and other False Statements. Effective 9/1/95 H.B. 655, the 74th Legislature established a law to suspend professional licenses of those with child support delinquency.